BEST AVAILABLE COPY

		L	\perp	Ц	
Applic	at	ion	or	D	ocket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

09684965

CLAIMS AS			S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE			OTHER THA											
TOTAL CLAIMS		(Column 1)		(Oolullii 2)					□ OR		FEE											
FOR		NUMBER FILED		NUMBER EXTRA		BASIC F		355.00	OR	RATE BASIC FEE	710.00											
TOTAL CHARGEABLE CLAIMS			5/ minus 20=		. 3/		X\$ 9:	_		OR	X\$18=	55800										
INDEPENDENT CLAIMS			minus 3 =		3		X40=	-		OR	X80=	2400										
MULTIPLE DEPENDENT CLAIM PRESENT							+135	_		OR	+270=											
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA	Ĺ		OR	TOTAL	1,508.10											
CLAIMS AS AMENDED - PART II											OTHER											
		(Column 1)			mn 2)	(Column 3)	SMALL ENTITY			OR	SMALL											
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
NDM	Total	*	Minus	**		=	X\$ 9	=	-	OR	X\$18=											
AME	Independent	NTATION OF M	Minus	PENDEN	T CLAIM	=	X40=	=		OR	X80=											
	FINOT FRESE	INTATION OF M	OLTIFEL DE	, CIVIDEIV	T OLANI		+135	=		OR	+270=											
								AL		OR	TOTAL ADDIT. FEE											
		(Column 1)		(Colu	ımn 2)	(Column 3)	ADDIT. F		-	•												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	RATE	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
NOW	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=											
AME	Independent	NTATION OF M	Minus	***	T CLAIM	=	X40=			OR	X80=											
_	TINOI PHESE	INTATION OF M	OLITE DE	.r ENUEN	T CLAIM		+135	=		OR	+270=											
							TO1 ADDIT. F			OR	TOTAL ADDIT. FEE											
		(Column 1)			ımn 2)	(Column 3)																
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	•	Minus	**		=	X\$ 9:	= [OR	X\$18=											
	Independent	*	Minus	***	IT CLAIRA	=	X40=			OR	X80=											
	FIRST PHESE	ENTATION OF M	IOLI IPLE DE	LENDE	II CLAIM		+135:	<u> </u>		OR	+270=											
•••	*. If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **OTAL ADDIT. FEE ADDIT. FEE																					
	The "Highest Nur	mber Previously Pa	aid For" (Total	or Indepen	dent) is the	e highest numbe	er found in the	app	propriate bo	x in co	lumn 1.	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										